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## **CONFIRMATION NO. 3589**

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** CONTINUING DATA **********************************								
Foreign Priority claimed	yes no	STA	TE OR			тот	AL	INDEPENDENT
15 USC 119 (a-d) conditions \( \begin{align*} \begin{align*} \lefty & \begin{align*} \lefty &			JNTRY	SHEETS DRAWING		CLAI	MS	CLAIMS
Acknowledged	Examiner's Signature In	itials (	BN	Divi	·	16	3	4
ADDRESS 23347 GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B475 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398								
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l ln	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:				All Fees  1.16 Fees ( Filing )  1.17 Fees ( Processing Ext. of time )			